



**TABLE 1  
MEDICAID BENEFICIARIES AND EXPENDITURES  
TOTAL AND FEE-FOR-SERVICE (FFS)  
INDIANA, CALENDAR YEAR 1999**

Population Characteristics	Beneficiaries				Expenditures			
	Total Number	Percent of Total Beneficiaries	Number in Fee-for-Service (FFS) One or More Months	Percent in FFS One or More Months	Total Expenditures	Percent of Total Expenditures	Total for FFS	Percent for FFS
<b>All</b>	694,508	100%	625,774	90%	\$2,763,639,164	100%	\$2,572,887,786	93%
<b>Age</b>								
0-3	129,076	19%	110,963	86%	\$214,138,048	8%	\$161,095,784	75%
4-5	49,624	7%	42,625	86%	\$43,234,058	2%	\$31,968,633	74%
6-12	147,217	21%	125,659	85%	\$167,581,295	6%	\$128,543,731	77%
13-18	84,745	12%	73,485	87%	\$154,573,928	6%	\$126,824,101	82%
19-21	30,919	4%	28,754	93%	\$84,520,022	3%	\$71,067,594	84%
22-44	126,405	18%	118,446	94%	\$639,886,569	23%	\$597,297,602	93%
45-64	51,568	7%	50,900	99%	\$530,093,949	19%	\$526,723,237	99%
65 and older	74,954	11%	74,942	100%	\$929,611,295	34%	\$929,367,104	100%
<b>Gender</b>								
Female	416,656	60%	378,188	91%	\$1,696,287,629	61%	\$1,577,156,099	93%
Male	277,852	40%	247,586	89%	\$1,067,351,535	39%	\$995,731,687	93%
<b>Race</b>								
White	485,097	70%	453,153	93%	\$2,267,752,707	82%	\$2,165,115,801	95%
Black	165,625	24%	132,448	80%	\$416,555,524	15%	\$339,780,925	82%
Hispanic	34,982	5%	32,148	92%	\$56,371,720	2%	\$47,416,432	84%
American Indian/Alaskan Native	484	0%	443	92%	\$1,460,477	0%	\$1,339,730	92%
Asian/Pacific Islander	2,092	0%	1,914	91%	\$4,929,378	0%	\$4,414,407	90%
Other/Unknown	6,228	1%	5,668	91%	\$16,569,358	1%	\$14,820,491	89%
<b>Dual Status</b>								
Aged Duals with Full Medicaid	61,114	9%	61,112	100%	\$879,380,619	32%	\$879,213,619	100%
Disabled Duals with Full Medicaid	34,957	5%	34,941	100%	\$494,351,991	18%	\$493,951,932	100%
Duals with Limited Medicaid	20,034	3%	20,034	100%	\$23,326,420	1%	\$23,281,139	100%
Other Duals	508	0%	481	95%	\$1,801,944	0%	\$1,655,364	92%
Disabled Non-Duals	58,344	8%	55,809	96%	\$615,284,556	22%	\$604,836,835	98%
All Other Non-Duals	519,551	75%	453,397	87%	\$749,493,634	27%	\$569,948,897	76%
<b>Eligibility Group</b>								
Aged	74,563	11%	74,552	100%	\$926,415,256	34%	\$926,205,406	100%
Disabled	102,908	15%	100,357	98%	\$1,118,096,003	40%	\$1,107,218,663	99%
Adults	112,832	16%	103,596	92%	\$207,936,563	8%	\$156,604,943	75%
Children	404,170	58%	347,235	86%	\$511,142,282	19%	\$382,811,742	75%

Notes: Months are defined as fee-for-service (FFS) if they are months when an individual is enrolled in Medicaid but not in a Medicaid capitated comprehensive managed care or behavioral managed care plan. For subsequent tables, only FFS months are included.

Beneficiaries are all individuals enrolled in Medicaid, including children in Medicaid-SCHIP, for at least one month in the calendar year.

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

**TABLE 2  
 MEDICAID FFS MENTAL HEALTH BENEFICIARIES AND EXPENDITURES  
 COMPARED TO TOTAL FFS BENEFICIARIES AND EXPENDITURES  
 INDIANA, CALENDAR YEAR 1999**

	Total Number of Beneficiaries in FFS Population	FFS Mental Health Population		Total Expenditures for FFS Population	FFS Expenditures for Mental Health Population	
		Number of Beneficiaries	Percent of Total FFS Beneficiaries		Total Amount	Percent of Total FFS Expenditures
<b>All</b>	625,774	82,486	13%	\$2,572,887,786	\$866,578,932	34%
<b>Age</b>						
0-3	110,963	1,049	1%	\$161,095,784	\$3,617,061	2%
4-5	42,625	2,585	6%	\$31,968,633	\$7,595,356	24%
6-12	125,659	18,028	14%	\$128,543,731	\$60,476,822	47%
13-18	73,485	12,669	17%	\$126,824,101	\$68,605,218	54%
19-21	28,754	2,319	8%	\$71,067,594	\$21,898,493	31%
22-44	118,446	22,749	19%	\$597,297,602	\$268,033,956	45%
45-64	50,900	13,342	26%	\$526,723,237	\$217,482,992	41%
65 and Older	74,942	9,745	13%	\$929,367,104	\$218,869,034	24%
<b>Gender</b>						
Female	378,188	45,997	12%	\$1,577,156,099	\$487,526,362	31%
Male	247,586	36,489	15%	\$995,731,687	\$379,052,570	38%
<b>Race</b>						
White	453,153	68,297	15%	\$2,165,115,801	\$744,996,741	34%
Black	132,448	12,193	9%	\$339,780,925	\$107,012,300	31%
Hispanic	32,148	1,393	4%	\$47,416,432	\$8,890,491	19%
American Indian/Alaskan Native	443	69	16%	\$1,339,730	\$437,610	33%
Asian/Pacific Islander	1,914	96	5%	\$4,414,407	\$1,099,664	25%
Other/Unknown	5,668	438	8%	\$14,820,491	\$4,142,126	28%
<b>Dual Status</b>						
Aged Duals with Full Medicaid	61,112	9,070	15%	\$879,213,619	\$206,387,315	23%
Disabled Duals with Full Medicaid	34,941	13,275	38%	\$493,951,932	\$233,992,351	47%
Duals with Limited Medicaid	20,034	1,447	7%	\$23,281,139	\$4,378,606	19%
Other Duals	481	111	23%	\$1,655,364	\$780,195	47%
Disabled Non-Duals	55,809	17,517	31%	\$604,836,835	\$265,270,055	44%
All Other Non-Duals	453,397	41,066	9%	\$569,948,897	\$155,770,410	27%
<b>Eligibility Group</b>						
Aged	74,552	9,692	13%	\$926,205,406	\$218,034,098	24%
Disabled	100,357	31,984	32%	\$1,107,218,663	\$501,948,783	45%
Adults	103,596	8,600	8%	\$156,604,943	\$29,395,704	19%
Children	347,235	32,206	9%	\$382,811,742	\$117,159,591	31%

Note: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

**TABLE 3  
MEDICAID FFS MENTAL HEALTH POPULATION  
BY DIAGNOSTIC CATEGORY AND AGE GROUP  
INDIANA, CALENDAR YEAR 1999**

Diagnostic Category	FFS Mental Health Population							
	All Ages		21 and Under		22-64		65 and Older	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Schizophrenia	9,748	12%	276	1%	7,971	22%	1,501	15%
Major depression and affective psychoses	17,065	21%	3,854	11%	10,964	30%	2,247	23%
Other psychoses	3,251	4%	206	1%	1,253	3%	1,792	18%
Childhood psychoses	1,092	1%	769	2%	311	1%	12	0%
Neurotic & other depressive disorders	16,878	20%	4,547	12%	9,750	27%	2,581	26%
Personality disorders	815	1%	100	0%	616	2%	99	1%
Other mental disorders	1,449	2%	272	1%	521	1%	656	7%
Special symptoms or syndromes	2,151	3%	998	3%	892	2%	261	3%
Stress & adjustment reactions	11,269	14%	8,159	22%	2,750	8%	360	4%
Conduct disorders	3,644	4%	2,610	7%	839	2%	195	2%
Emotional disturbances	3,681	4%	3,641	10%	32	0%	8	0%
Hyperkinetic syndrome	11,398	14%	11,201	31%	192	1%	5	0%
No Diagnosis	45	0%	17	0%	0	0%	28	0%
<b>Total</b>	<b>82,486</b>	<b>100%</b>	<b>36,650</b>	<b>100%</b>	<b>36,091</b>	<b>100%</b>	<b>9,745</b>	<b>100%</b>

Notes: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

**The diagnostic category for each user is the one that occurred most frequently among primary diagnoses on claims during the year.**

Schizophrenia (ICD-9 CM diagnosis codes beginning with 295) includes both chronic and acute schizophrenic disorders.

Major depression and affective psychoses (ICD-9 CM diagnosis codes beginning with 296) includes manic, depressive, and bipolar disorders.

Other psychoses (ICD-9 CM diagnosis codes beginning with 297 or 298) includes paranoid states, delusional disorders, depressive psychosis, and reactive psychoses.

Childhood psychoses (ICD-9 CM diagnosis codes beginning with 299) includes infantile autism, disintegrative disorders, and childhood type schizophrenia.

Neurotic & other depressive disorders (ICD-9 CM diagnosis codes beginning with 300 or 311) includes anxiety states; phobic, obsessive compulsive, and other neurotic disorders; and unspecified depressive disorders.

Personality disorders (ICD-9 CM diagnosis codes beginning with 301) includes affective, schizoid, explosive, histrionic, antisocial, dependent, and other personality disorders.

Other mental disorders (ICD-9 CM diagnosis codes beginning with 302, 306, or 310) includes sexual deviations, physiological malfunction arising from mental factors, and nonpsychotic mental disorders due to organic brain damage.

Special symptoms or syndromes (ICD-9 CM diagnosis codes beginning with 307) includes eating disorders, tics and repetitive movement disorders, sleep disorders, and enuresis.

Stress & adjustment reactions (ICD-9 CM diagnosis codes beginning with 308 or 309) includes acute reaction to stress; depressive reaction, and separation disorders, and conduct disturbance.

Conduct disorders (ICD-9 CM diagnosis codes beginning with 312) includes aggressive outbursts, truancy, delinquency, kleptomania, impulse control disorder, and other conduct disorders.

Emotional disturbances (ICD-9 CM diagnosis codes beginning with 313) includes overanxious disorder, shyness, relationship problems and other mixed emotional disturbances of childhood or adolescence such as oppositional disorder.

Hyperkinetic syndrome (ICD-9 CM diagnosis codes beginning with 314) includes attention deficit with and without hyperactivity and hyperkinesis with or without developmental delay.

**TABLE 4  
PSYCHIATRIC AND GENERAL INPATIENT HOSPITAL USE AND AVERAGE ANNUAL HOSPITAL DAYS PER USER  
FOR MEDICAID FFS MENTAL HEALTH POPULATION, BY SEX AND AGE GROUP  
INDIANA, CALENDAR YEAR 1999**

Sex	Age Group	Psychiatric Hospital		General Inpatient Hospital		Total Inpatient Hospital			General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses		
		Number of Users	Average Annual Days Per User	Mental Health Treatment		Mental Health Treatment			Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User
				Number of Users	Average Annual Days Per User	Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User			
Female	0-3	2	6	0	0	2	0%	6	61	14%	10
	4-5	14	11	13	10	26	3%	11	32	3%	5
	6-12	151	17	125	12	264	4%	16	125	2%	8
	13-18	313	16	366	10	647	11%	14	446	8%	4
	19-21	42	41	107	13	144	9%	22	442	28%	3
	22-44	0	0	1,471	7	1,471	10%	7	2,705	18%	5
	45-64	0	0	810	7	810	9%	7	2,179	24%	6
	65+	114	104	289	10	400	5%	37	2,156	29%	1
All Ages	636	34	3,181	8	3,764	8%	12	8,146	18%	4	
Male	0-3	6	7	2	8	8	1%	7	65	10%	9
	4-5	28	16	23	8	51	3%	12	55	3%	5
	6-12	531	30	367	13	845	7%	25	197	2%	5
	13-18	455	50	386	11	791	11%	34	167	2%	6
	19-21	55	41	110	45	152	21%	48	36	5%	15
	22-44	0	0	1,222	7	1,222	15%	7	981	12%	6
	45-64	0	0	414	5	414	9%	5	1,029	23%	6
	65+	60	100	105	19	162	7%	49	762	33%	1
All Ages	1,135	42	2,629	10	3,645	10%	20	3,292	9%	5	
Total	0-3	8	6	2	8	10	1%	7	126	12%	10
	4-5	42	14	36	9	77	3%	12	87	3%	5
	6-12	682	27	492	13	1,109	6%	22	322	2%	6
	13-18	768	36	752	11	1,438	11%	25	613	5%	5
	19-21	97	41	217	29	296	13%	35	478	21%	4
	22-44	0	0	2,693	7	2,693	12%	7	3,686	16%	5
	45-64	0	0	1,224	6	1,224	9%	6	3,208	24%	6
	65+	174	103	394	12	562	6%	40	2,918	30%	1
All Ages	1,771	39	5,810	9	7,409	9%	16	11,438	14%	4	

Notes: All beneficiaries in this table had a mental health diagnosis as the primary diagnosis on a FFS Medicaid claim during 1999, or received a clearly identifiable mental health service (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Those who received inpatient hospital services for which the primary diagnosis on the hospital claim was a mental health diagnosis are shown in the "General Inpatient Hospital – Mental Health Treatment" column. Those who received inpatient hospital services for which the primary diagnosis on the claim was not a mental health diagnosis are shown in the "General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses" column.

When a dually eligible beneficiary's inpatient stay is primarily covered by Medicare, Medicaid often pays a deductible. Some states interpret their payment of the deductible as Medicaid coverage for one day of the stay. Other states interpret "Medicaid covered days" as including only days covered in full by Medicaid, and thus report zero covered days on a crossover stay. Another group of states reports the number of days covered by Medicare as covered days. Finally, many states do not retain any details about lengths of stay on crossover claims. For any one or combination of these reasons, average lengths of stay for beneficiaries who are dually eligible (most aged and some adults) are inaccurately reduced because of the presence of individual claims with "1" or "0" covered days. In some circumstances this even causes inpatient hospital stays to average "0" days in length, and it explains more generally the low numbers that appear for some groups on Table 4.

Individuals may appear in more than one column on this table.

**TABLE 5  
EMERGENCY ROOM USE FOR MEDICAID FFS MENTAL HEALTH AND NON-MENTAL  
HEALTH BENEFICIARIES, BY SEX AND AGE GROUP  
INDIANA, CALENDAR YEAR 1999**

Sex	Age Group	Mental Health Beneficiaries With Any Emergency Room Use					Non- Mental Health Beneficiaries With Any Emergency Room Use		
		Number	Percent of Total FFS Mental Health Beneficiaries	Average Number of Emergency Room Visits for Users of Any ER Visits			Number	Percent of Total FFS Non-Mental Health Beneficiaries	Number of Emergency Room Visits for Users of Any ER Visits
				For Mental Health Treatment	For Non-Mental Health Treatment	All ER Visits			
Female	0-3	232	55%	0.08	2.08	2.16	17,113	32%	1.85
	4-5	313	34%	0.02	1.79	1.81	4,074	21%	1.51
	6-12	1,623	27%	0.04	1.56	1.60	8,732	16%	1.46
	13-18	2,348	41%	0.17	2.00	2.16	6,757	20%	1.71
	19-21	927	59%	0.36	3.00	3.36	6,691	29%	1.90
	22-44	8,254	56%	0.30	3.22	3.53	19,594	26%	2.02
	45-64	4,825	54%	0.25	3.06	3.31	7,734	35%	2.35
	65+	3,975	54%	0.10	2.51	2.60	14,571	30%	2.03
	All Ages	22,497	49%	0.22	2.77	2.99	85,266	26%	1.90
Male	0-3	331	53%	0.07	2.04	2.11	19,108	34%	1.94
	4-5	652	39%	0.05	1.77	1.82	4,611	23%	1.56
	6-12	3,349	28%	0.05	1.56	1.60	9,019	17%	1.42
	13-18	2,206	32%	0.17	1.69	1.86	4,978	18%	1.53
	19-21	326	44%	0.56	2.59	3.15	614	19%	1.94
	22-44	3,655	46%	0.51	2.94	3.44	5,465	28%	2.47
	45-64	2,137	49%	0.29	2.99	3.28	5,097	33%	2.46
	65+	1,300	56%	0.09	2.66	2.76	4,829	29%	2.09
	All Ages	13,956	38%	0.24	2.31	2.55	53,721	25%	1.90
Total	0-3	563	54%	0.07	2.06	2.13	36,221	33%	1.90
	4-5	965	37%	0.04	1.78	1.82	8,685	22%	1.54
	6-12	4,972	28%	0.05	1.56	1.60	17,751	16%	1.44
	13-18	4,554	36%	0.17	1.85	2.02	11,735	19%	1.63
	19-21	1,253	54%	0.41	2.89	3.31	7,305	28%	1.90
	22-44	11,909	52%	0.37	3.13	3.50	25,059	26%	2.12
	45-64	6,962	52%	0.27	3.04	3.30	12,831	34%	2.40
	65+	5,275	54%	0.10	2.55	2.64	19,400	30%	2.04
	All Ages	36,453	44%	0.23	2.59	2.82	138,987	26%	1.90

Notes: An emergency room visit is classified as "for mental health treatment" if one of the mental health diagnoses in Table 3 is shown as the primary diagnosis on the emergency room claim. If any other diagnosis is shown as the primary diagnosis on the claim, the emergency room visit is classified as being for non-mental health treatment. Visits are defined by unique dates of service.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

**TABLE 6**  
**PRESCRIPTION PSYCHOTROPIC DRUG USE FOR MEDICAID FFS MENTAL HEALTH**  
**AND NON-MENTAL HEALTH BENEFICIARIES, BY AGE GROUP**  
**INDIANA, CALENDAR YEAR 1999**

Age Group	Total FFS Beneficiaries with Any Psychotropic Drug Use		FFS Mental Health Beneficiaries with Any Psychotropic Drug Use		FFS Non-Mental Health Beneficiaries with Any Psychotropic Drug Use	
	Number	Percent of Total FFS Beneficiaries	Number	Percent of Total FFS MH Beneficiaries	Number	Percent of Total FFS Non-MH Beneficiaries
0-3	4,657	4%	243	23%	4,414	4%
4-5	2,699	6%	971	38%	1,728	4%
6-12	16,585	13%	11,070	61%	5,515	5%
13-18	10,492	14%	7,096	56%	3,396	6%
19-21	3,099	11%	1,424	61%	1,675	6%
22-44	32,964	28%	18,031	79%	14,933	16%
45-64	25,758	51%	11,736	88%	14,022	37%
65+	36,580	49%	8,282	85%	28,298	43%
All Ages	132,834	21%	58,853	71%	73,981	14%

Notes: FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during 1999 (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Psychotropic drugs are defined as drugs in any of the categories shown on Table 7, as grouped by Multum prescription drug grouping software.

Non-mental health beneficiaries who are dual eligibles may have received mental health treatment under Medicare that is not seen in Medicaid coinsurance claims.

**TABLE 7**  
**PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 21 AND UNDER WHO**  
**USED PRESCRIPTION PSYCHOTROPIC DRUGS,**  
**BY DIAGNOSTIC CATEGORY AND DRUG TYPE**  
**INDIANA, CALENDAR YEAR 1999**

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	276	49%	73%	18%	7%	7%	53%	5%
Major depression and affective psychoses	3,854	58%	24%	16%	5%	22%	38%	18%
Other psychoses	206	39%	66%	17%	3%	17%	46%	9%
Childhood psychoses	769	34%	41%	26%	1%	21%	37%	21%
Neurotic & other depressive disorders	4,547	42%	11%	14%	1%	15%	23%	28%
Personality disorders	100	42%	27%	22%	7%	16%	33%	26%
Other mental disorders	272	20%	10%	17%	1%	12%	14%	40%
Special symptoms or syndromes	998	16%	7%	12%	0%	5%	8%	55%
Stress & adjustment reactions	8,159	19%	6%	8%	0%	14%	12%	45%
Conduct disorders	2,610	24%	15%	10%	1%	22%	21%	35%
Emotional disturbances	3,641	25%	10%	8%	1%	24%	19%	35%
Hyperkinetic syndrome	11,201	24%	11%	9%	1%	76%	29%	9%
No Diagnosis	17	18%	0%	6%	6%	6%	0%	35%
<b>Total</b>	<b>36,650</b>	<b>29%</b>	<b>13%</b>	<b>11%</b>	<b>1%</b>	<b>35%</b>	<b>24%</b>	<b>43%</b>

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

**TABLE 8**  
**PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 22 TO 64 WHO**  
**USED PRESCRIPTION PSYCHOTROPIC DRUGS,**  
**BY DIAGNOSTIC CATEGORY AND DRUG TYPE**  
**INDIANA, CALENDAR YEAR 1999**

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	7,971	45%	88%	36%	11%	1%	61%	3%
Major depression and affective psychoses	10,964	73%	39%	56%	11%	3%	65%	6%
Other psychoses	1,253	46%	67%	41%	3%	1%	54%	9%
Childhood psychoses	311	43%	60%	42%	5%	2%	53%	10%
Neurotic & other depressive disorders	9,750	65%	17%	56%	1%	1%	49%	10%
Personality disorders	616	63%	44%	48%	5%	2%	57%	12%
Other mental disorders	521	41%	33%	41%	3%	2%	39%	23%
Special symptoms or syndromes	892	46%	14%	44%	1%	1%	33%	26%
Stress & adjustment reactions	2,750	52%	16%	41%	1%	2%	37%	24%
Conduct disorders	839	42%	53%	42%	7%	2%	50%	14%
Emotional disturbances	32	50%	50%	53%	3%	0%	47%	9%
Hyperkinetic syndrome	192	51%	25%	37%	3%	49%	54%	8%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
<b>Total</b>	<b>36,091</b>	<b>60%</b>	<b>43%</b>	<b>49%</b>	<b>7%</b>	<b>2%</b>	<b>55%</b>	<b>18%</b>

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

**TABLE 9**  
**PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 65 AND OLDER WHO**  
**USED PRESCRIPTION PSYCHOTROPIC DRUGS,**  
**BY DIAGNOSTIC CATEGORY AND DRUG TYPE**  
**INDIANA, CALENDAR YEAR 1999**

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						More than One Psychotropic Drug Type	No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants			
Schizophrenia	1,501	38%	87%	41%	5%	0%	58%	4%	
Major depression and affective psychoses	2,247	77%	51%	58%	6%	2%	70%	4%	
Other psychoses	1,792	43%	47%	42%	1%	1%	43%	24%	
Childhood psychoses	12	67%	67%	67%	0%	0%	83%	0%	
Neurotic & other depressive disorders	2,581	72%	34%	60%	1%	1%	60%	8%	
Personality disorders	99	53%	59%	51%	5%	0%	56%	10%	
Other mental disorders	656	31%	38%	38%	1%	0%	35%	36%	
Special symptoms or syndromes	261	43%	40%	47%	0%	1%	39%	22%	
Stress & adjustment reactions	360	61%	31%	55%	2%	2%	51%	14%	
Conduct disorders	195	47%	70%	61%	1%	1%	64%	11%	
Emotional disturbances	8	25%	38%	50%	0%	0%	25%	25%	
Hyperkinetic syndrome	5	60%	40%	40%	0%	0%	60%	20%	
No Diagnosis	28	54%	71%	64%	0%	0%	64%	7%	
<b>Total</b>	<b>9,745</b>	<b>58%</b>	<b>50%</b>	<b>51%</b>	<b>3%</b>	<b>1%</b>	<b>56%</b>	<b>15%</b>	

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).